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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 10-08183	FILING DATE	
						APPLICANT(S)		
						CLAIMS		
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51	
2	/						52	
3	/						53	
4	/						54	
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43							93	
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46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.	/						TOTAL IND.	
TOTAL DEP.	/8						TOTAL DEP.	
TOTAL CLAIMS	/9						TOTAL CLAIMS	

PTO-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS U.S. DEPARTMENT OF COMMERCE
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